

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: <u>8/16/07</u>		2 Serial/Patent # <u>101823423</u>			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
<input type="checkbox"/>	Filing			\$	
<input type="checkbox"/>	Amendment			\$	
<input type="checkbox"/>	Extension of Time			\$	
<input type="checkbox"/>	Notice of Appeal/Appeal			\$	
<input checked="" type="checkbox"/>	Petition	-15w	<u>7/12/04</u>	\$	<u>130</u>
<input type="checkbox"/>	Issue			\$	
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$	
<input type="checkbox"/>	Maintenance			\$	
<input type="checkbox"/>	Assignment			\$	
<input type="checkbox"/>	Other			\$	
		7 TOTAL AMOUNT OF REFUND		\$ <u>130</u>	
		8 TO BE REFUNDED BY:			
10 REASON:		<input checked="" type="checkbox"/> Treasury Check <input type="checkbox"/> Credit Deposit A/C #: <u>13--2165</u>			
<input type="checkbox"/>	Overpayment				
<input type="checkbox"/>	Duplicate Payment				
11 REFUND REQUESTED BY:		TYPED/PRINTED NAME: <u>AN Brown</u> SIGNATURE: <u>An Brown</u> OFFICE: <u>PTO</u> THIS SPACE RESERVED FOR FINANCE USE ONLY: <u>8/24/04</u> APPROVED: <u>Alma Bell</u> DATE: <u>8/24/04</u>			
TITLE: <u>Att</u> PHONE: <u>3050310</u>					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B